## UNITED STATES BANKRUPTCY COURT FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

In re	:		)	Chapter				
		Debtor(s)	) ) )	Case No				
PETITION FOR UNCLAIMED FUNDS AND ORDER THEREON								
I, the undersigned petitioner, under penalty of perjury under the laws of the United States of America declare (or certify, verify or state) that the following statements and information are true and correct:								
(	Pursuant to 11 U. S. C. § 347(a) of the Bankruptcy Code, the trustee in this case paid (deposited) this unclaimed money to the Clerk, U. S. Bankruptcy Court, which was subsequently deposited in the United States Treasury.							
2. I c	. I am petitioning to receive the total amount of \$ on behalf of the creditor							
	. [Please check and complete the applicable subparagraph below and attach requested information]:							
	Α.	I am the creditor named in paragra unclaimed funds is as follows:	ph	2 and full proof of m	y right to the			
		<ul> <li>copy of original proof of claim or</li> <li>copy of trustee's final report s funds (attach copy)</li> <li>copy of creditor's driver's licer identity (attach copy)</li> <li>social security number or</li> </ul>	ho\ ise	wing name of credito	J			
		tax payer identificati	ion	number				
	В.	I am an employee of the creditor na I am authorize provided by my employer's authorizeherein orby the creditor's attached written	zed zing	by the creditor to file g signature				
	_ C.	I am the lawful attorney-in-fact for duly authorized by the attached orig petition. I am aware of all pertinen powers of attorney. The following i and a brief history of the creditor (f includes, if applicable, identification prior owner(s): (describe below or provided)	gin t s s tl ror of	al notarized power of tate law requirement ne creditor's address n filing of the claim to any sale of the comp	attorney to file this s regarding such and phone number, o present) which pany and the new and			

	D.		ate basis for your claim):	but I am entitled to payment of such (describe below or use attachment if			
4.				nowledge that any other party may be			
5.	entitled to, and is not aware of any dispute regarding, the funds at issue.  I understand that, pursuant to 18 U.S.C. §152, I shall be fined not more than \$5,000, or imprisoned not more than five years, or both, if I have knowingly and fraudulently made any false statements in this document.						
6.	On a copy of this document (fully completed) was mailed to the U.S. Attorney, at P.O. BOX 309, SCRANTON, PA 18501, per 28 U.S.C. §2042.						
Exe	ecuted	on(date)					
Pet	itioner	r's Signature					
Тур	oe or P	Print Petitioner's Nam	е				
Em	ployer	-Creditor's Signature					
Тур	oe or P	Print Employer-Credite	or's Name				
Pet	itioner	r's or Employer-Credi	tor's Address				
API	PROVE	D AS TO FORM:					
FIN	IANCIA	AL ADMINISTRATOR					
ΙΤ	IS SO	ORDERED:					
 Juc	ine						
Jul	- <b>-</b> -						